

Unit No.

Year

KENTUCKY TRANSPORTATION CABINET Department of Vehicle Regulation/Division of Motor Carriers P.O. Box 2007, Frankfort, Kentucky 40602-2007 (502) 564-4127 (8:00 A.M. - 4:30 P.M. EST)

TC 95-15 Rev. 11/07

Registration Plate No.

Walk-ins: 8:00 A.M. – 4:00 P.M. http://transportation.ky.gov/dmc

Certificate of Motor Vehicle Equipment Lease

This is to certify that the following described motor vehicle has been leased by the undersigned lessor, the owner thereof, to the undersigned Lessee (one power unit only):

Serial No. (VIN)

Make	Unit No.	Year	Serial No. (VIN)	Plate No.	State	
and subjection regulation Lease Ag	ect to the provi s of the Kentu greement tha	visions of the ucky Transporta t may be in	motor vehicle equipment has to Kentucky Motor Carrier Act as ation Cabinet adopted pursuan conflict with the rules and ded to comply with such rules a	s amended and the t thereto. Any provis regulations of the	rules and sion in the	
WITNESS	S OUR HANDS	S THIS	DAY OF	20)	
	LESS	SOR		LESSEE		
BY:	NAME or		BY:			
	NAME ar	IG IIILE		NAME and TITLE		
ADDRESS				ADDRESS		
WITNESS	SED:					